

Work Order ID 88093

July-25-12 4:02:46 PM

88093

Page 1

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12/07/25 Tooling:

Date:

Run Start *NR1*

QC:

Date: SPC (Y/N):

Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

D412-664-243

E/DEO

100

0.00

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile and create labels as per PPP D412-664-203 CHG 008

CHG 009

★SEE WID CHG ATTACHED

110

0.00

110

Packaging

Packaging

Memo

0.00

Packaging

120

0.00

120

BENDING MACHINE - CROSSTUBES

CNC Bend 2

Memo

0.00

CNC Alpha 160 Bender

★ PTO

Bend tube as per Dwg D412-664-243 using CNC bender program 412-aft and Folio FT010

MO/Rm

MLJ 12/08/29

MO 12/8/14

12/8/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA Ad Date: 12/08/30QA Closed: ex Date: 12/08/30

| | | | | | | | | | | | |
|---|---------|------|-----|--|-------------------|--|-------------|----------------|-----------------|--|--|
| Work Order: <u>88093</u> Part No. <u>D 412-664-203</u> NCR No. <u>12-1767</u> | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input checked="" type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | 12/8/14 | 120 | 1 | CRUSHING IS OVER TOLERANCE AFTER BENDING | DAS 12/8/14 | ACCEPTABLE PER ATTACHED SR | DAS 12/8/14 | DAS 16 12/8/14 | DAS 15 12/30/14 | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | |
|--|---|---|--|
| Landing Gear <input checked="" type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input checked="" type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

Work Order ID 88093

July-25-12 4:02:46 PM

88093

Page 2

Item ID: D412-664-203

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|---|---|----------------------|---------|---------------------------|--------------|---------------|---------------|------------------|----------------|
| 130 *130* QC Quality Control | QC15- Crosstube Dimensional Check Memo | 0.00 0.00 | | DAS 16 2-8 17/08/14 | | | | | |
| 140 *140* Crosstubes Crosstubes | Crosstubes Memo 1-Drill pilot holes in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551 and drill table DT8577 using #9 holes as per QSI 10 to install towers. 2-Ream hole to finish size in tube as per Dwg D412-664-243 using drill Jig DT8550 & DT8551. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes. 3-SCRIBE PART # & BATCH # 4- *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D412-664-243 | 0.00 0.00 | | | | | | | |

MO/RM

12/8/14

MO 12/8/14

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | | | | | | | |
|--------------------------|------------------------------|--|--------------------------|----------------|--|--------------------------|---------------------------------|--|--------------------------|----------------------|
| Landing Gear | | | General | | | | | | | |
| <input type="checkbox"/> | Bending | | <input type="checkbox"/> | Bend | | <input type="checkbox"/> | Grain | | <input type="checkbox"/> | Ovalized |
| <input type="checkbox"/> | Centre Not Concentric to O/S | | <input type="checkbox"/> | BOM/Route | | <input type="checkbox"/> | Hardware | | <input type="checkbox"/> | Over/Under tolerance |
| <input type="checkbox"/> | Cracks | | <input type="checkbox"/> | Broken/Damaged | | <input type="checkbox"/> | Inspection Incomplete | | <input type="checkbox"/> | Part Incorrect |
| <input type="checkbox"/> | Crushed/Crimped | | <input type="checkbox"/> | Burrs | | <input type="checkbox"/> | Instructions Incomplete/Unclear | | <input type="checkbox"/> | Part Lost/Missing |
| <input type="checkbox"/> | Cuffs | | <input type="checkbox"/> | Contamination | | <input type="checkbox"/> | Maintenance | | <input type="checkbox"/> | Part Moved |
| <input type="checkbox"/> | Heat Treat | | <input type="checkbox"/> | Countersink | | <input type="checkbox"/> | Mislabeled | | <input type="checkbox"/> | Positioned Wrong |
| <input type="checkbox"/> | Inspection Strip in Tube | | <input type="checkbox"/> | Cut Too Short | | <input type="checkbox"/> | Misread | | <input type="checkbox"/> | Power Loss/Surge |
| <input type="checkbox"/> | Ripples in Bend | | <input type="checkbox"/> | Drill Holes | | <input type="checkbox"/> | Offset | | <input type="checkbox"/> | Pressure/Forced |
| <input type="checkbox"/> | Torque Waves in Extrusion | | <input type="checkbox"/> | Drawing | | <input type="checkbox"/> | Out of Calibration | | | Temperature/Cure |
| <input type="checkbox"/> | Turning Sequence | | <input type="checkbox"/> | Finish | | <input type="checkbox"/> | Out of Sequence | | | Weld |
| <input type="checkbox"/> | Wave/Twist in Tube | | <input type="checkbox"/> | Folio | | <input type="checkbox"/> | Outside Dimensions | | | Wrong Stock Pulled |
| | | | | | | | | | | Other |

Work Order ID 88093

88093

Page 3

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

160

QC5- Inspect part completeness to step on W/O

0.00

160

QC

Memo

0.00

Quality Control

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

170

0.00

170

HandFXtube

Memo

0.00

Hand Finishing Crosstubes

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

1- CLEAN CROSSTUBE WITH WASH'N WIPE

180

Outsource process - NDT per QSI038 4.1

0.00

180

Outsource2

Memo

0.00

Outsource process - NDT

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

Liquid Penetrant Inspection as per QSI 038Or
Issue P/O: 17693 LPI as per ASTM 1417
Level 2 Attach copy of NDT results to work order

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other -- |

Work Order ID 88093

88093

Page 4

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 190 | | 0.00 | | | | | | | |
| *190* | Packaging | | | | | 1x | | | SD 12-8-10 |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | Inspect for transit damage | | | | | | | | |
| | Ensure copy of NDT results attached to work order. | | | | | | | | |
| 200 | QC5- Inspect part completeness to step on W/O | 0.00 | | | | | | | |
| *200* | | | | | | 1 | | | W 12 08 15 |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | Inspect for damage & ensure results are as per Dwg D412-664-203 | | | | | | | | |
| 203 | | 0.00 | | | | | | | |
| *203* | | | | | | Rm | | | 12-8-15 |
| HandFXtube | Memo | 0.00 | | | | | | | |
| Hand Finishing Crosstubes | *** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE*** | | | | | | | | |
| | 1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE BEFORE CHEMICAL CONVERSION | | | | | | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Work Order ID 88093

88093

Page 5

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

205

QC7-Inspect Chemical Conversion Coat

0.00

205

QC

Memo

0.00

Quality Control

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

1

W 12 08 15

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | |
|--|---|--|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </td> <td style="width: 33%;"> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </td> <td style="width: 33%;"> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </td> <td style="width: 33%;"> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </td> </tr> </table> | Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> | Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> | Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> | Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> |
| Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> | Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> | Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> | Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | |
|---|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|---|

Work Order ID 88093

88093

Page 6

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

210

0.00

210

SprayPaint

SprayPaint

Memo

0.00

Spray Painting

*** WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE***

Mask underside of crosstube as shown

1-Prime inside and outside crosstube as per QSI 005 4.2

2-Paint outside crosstube with White Imron as per DEO D412-664-243 and QSI 005 4.2

PRIME: 121746

Start Time: 8:00

Finish Time: 8:45

PAINT: 122381

Start Time: 4:15

Finish Time: 5:00

3- Apply clear coat after paint as per DEO

12-8-16

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|--|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|---|--|---|

Work Order ID 88093

88093

Page 7

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

220 QC14- Inspect Spray Paint

0.00

220

QC

Memo

0.00

Quality Control

Then, Wrap in plastic bag to protect from scratches

230

0.00

230

Crosstubes

Crosstubes

Memo

0.00

Crosstubes

Assemble as per Dwg D412-664-203

★ INSTALL CHAFING
SHIELD PER

ATTACHED DEO
& INSTRUCTION

1- Install chafing shield as per DEO D412-664-243. Top holes should be facing up.

A/R Proseal 890 Batch: 122441
EXP: 1/13

2- Lightly scuff the bonded area using a 320 grit sand paper and clean the area with 41058 wash 'n' wipe

3- Install support with Scotch-Weld DP460 and install clamps as per DEO Dwg D12-664-243 using installation jig DT9024. Torque clamps as per dwg

A/R Scotch-Weld DP460 Batch: 121368
EXP: 13-4-13

DAS
16
8-8

17/08/12

AL

12-8-26

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|--|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|---|--|---|

Work Order ID 88093

88093

Page 8

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Run Start

NR1

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop

NR2

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

240

QC5- Inspect part completeness to step on W/O

0.00

inspected assembly in
D80 D412-664-243-8-4

240

QC

Memo

0.00

Quality Control

DAS
16
9-89 12/08/27

250

Pick Kit

0.00

250

Packaging

Memo

0.00

Packaging

12/8/27 (1)

260

QC4- 100% Inspect kits for completeness

0.00

260

QC

Memo

0.00

Quality Control

DAS
16
9-89 12/08/27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Work Order ID 88093

88093

Page 9

July-25-12 4:02:46 PM

Item ID: D412-664-203

Accept

N900040100

Setup Start

NS1

Revision ID:

Stop

NS2

Item Name: Crosstube Aft

Start Date: 25/07/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 15/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

| Sequence ID/ Work Center ID | Operation Description | Set Up/ Run Hours | Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|--------------------------------|---|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
| 270 | | 0.00 | | | | | | | |
| *270* | Packaging | | | | | | | | |
| Packaging | Memo | 0.00 | | | | | | | |
| Packaging | Identify and pack for shipping as per PPP D412-664-203 *****Ensure tube is not packaged if curing time is less than 12 hrs, see step 27 for application time & date ***** Time & date of packaging: _____ Location: _____ | | | | | | | | |
| 280 | QC21- Final Inspection - Work Order Release | 0.00 | | | | | | | |
| *280* | | | | | | | | | |
| QC | Memo | 0.00 | | | | | | | |
| Quality Control | | | | | | | | | |

ML5 12 108129
ML5 12/08/29

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Picklist Print

July-25-12 4:02:50 PM

Page 1

Work Order ID: 88093

88093

Parent Item: D412-664-203

D412-664-203

Parent Item Name: Crosstube Aft

Start Date: 25/07/2012

Required Date: 15/08/2012

Start Qty: 1.00

Required Qty: 1.00

Comments:

IPP Rev:E04.02.16Reformat; Added D3189-1K/DS
 IPP Rev:F 06-03-29 Remove Coments on Pick List JLM
 IPP Rev:G 06.12.08 per ECN 886 EC
 IPP Rev:H 07-04-30 As per Rev D JLM
 IPP Rev:I 08-06-12 add comment in seq. 21 DD verified by:EC IPP rev J
 11.04.21 DEO D412-664-243-E-1 EC verified DD IPP REV:K
 11.10.03 DEO D412-664-243-E-2 DD verf:EC

| Component Item ID/ Item Name | Replacement Item ID | Mfg/ Purch | Bin Item | Primary Location | Last Location | Route Seq ID | Unit of Measure | Qty on Hand | Qty per Kit | Total Qty | Qty Issued | Date Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| D412-664-203TRN | | Manufactured | No | | | 110 | Each | 6.0000 | 1 | 1 | | | |

D412-664-203TRN

Crosstube Turning Detail

**

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| LG 88779 | 6 | |
| 83835 | 1 | |
| 87155 | 1 | |
| 87156 | 1 | |
| 87157 | 1 | |
| 87158 | 1 | |
| 87160 | 1 | |

①

MO

12/8/14

D2896-1

Manufactured No

230

Each

16.0000

1

1

D2896-1

Support

**

AS 12-8-26

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| LG052 | 8 | |
| 80586 | 8 | |
| LG053 | 8 | |
| 74465 | 8 | |

①

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Picklist Print

July-25-12 4:02:50 PM

Page 2

Work Order ID: 88093

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

88093

D412-664-203

Start Date: 25/07/2012

Required Date: 15/08/2012

Start Qty: 1.00

Required Qty: 1.00

D3189-1

Manufactured No

230

Each

23.0000

2

2

D3189-1

Chafing Shield

**

AS 12-8-26

Ⓢ

Location

Loc Qty

Loc Code

FG

4

36065

4

LG053

19

83458

6

85515

13

D3595-063-570

Manufactured No

230

Each

139.0000

2

2

D3595-063-570

RUBBER CUSHION

**

AS 12-8-26

Ⓢ

Location

Loc Qty

Loc Code

FG

8

37971

1

42243

7

LG

78

83294

78

MAT052

53

71534

1

76546

52

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | |
|---|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | | |
| FAULT CATEGORY | | | | | | | | | | | | |
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

Picklist Print

July-25-12 4:02:50 PM

Page 3

Work Order ID: 88093

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

88093

D412-664-203

Start Date: 25/07/2012

Required Date: 15/08/2012

Start Qty: 1.00

Required Qty: 1.00

MS21920-28

Purchased

No

230

Each

102.0000

4

4

MS21920-28

Clamp(per MIL-DTL-8783C)

**

AP 12-8-26

Location

Loc Qty

Loc Code

FG

5

105884

5

LG050

55

118713

3

120054

2

122518

50

LG051

42

121440

8

122204

34

MS21920-30

Purchased

No

230

Each

87.0000

2

2

MS21920-30

clamp(per MIL-DTL-8783C)

**

AP 12-8-26

Location

Loc Qty

Loc Code

LG

24

119529

24

LG051

63

111258

14

121583

49

AN6-40A

Purchased

No

250

Each

142.0000

4

AN6-40A

Bolt

**

AP 12-8-26

Location

Loc Qty

Loc Code

ST340

50

122416

50

ST342

92

120187

66

120833

4

121827

22

120187

July-25-12 4:02:51 PM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

Picklist Print

July-25-12 4:02:51 PM

Page 4

Work Order ID: 88093

Parent Item: D412-664-203

Parent Item Name: Crosstube Aft

88093

D412-664-203

Start Date: 25/07/2012

Required Date: 15/08/2012

Start Qty: 1.00

Required Qty: 1.00

AN6-41A

Purchased

No

250

Each

99.0000

2

2

**

AN6-41A
Bolt

Location

Loc Qty

Loc Code

ST340

50

122407

50

ST342

49

120423

19

121825

30

AN960JD616

NAS1149D0663J

Purchased

No

250

Each

0.0000

18

18

**

AN960JD616

Washer

MS21042L6

Purchased

No

250

Each

991.0000

6

6

**

MS21042L6

Nut

Location

Loc Qty

Loc Code

314

600

122441

600

ST300

391

117677

25

118384

3

118927

48

119075

115

120308

200

July-25-12 4:02:51 PM

Shop Packet Print

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

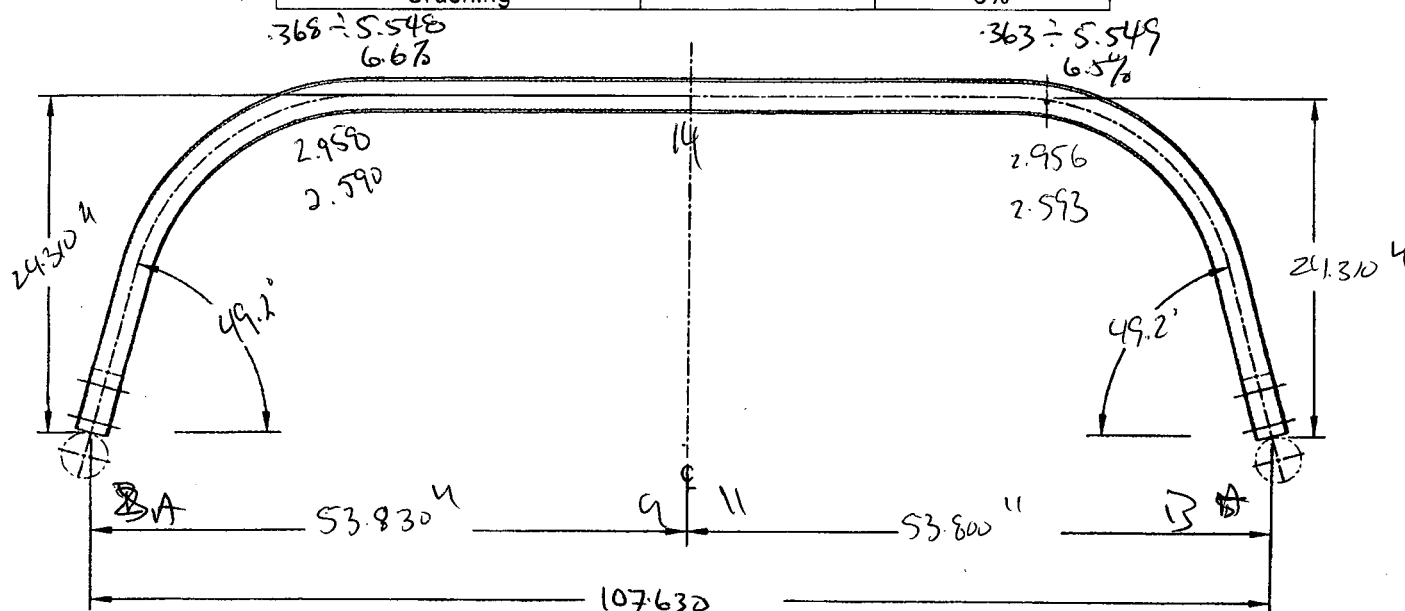
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|--|

| | | |
|--|---------------------|---------------------|
| DART AEROSPACE LTD | Work Order: | 88093 |
| Description: Crosstube High Aft (412) | Part Number: | D412-664-203 |
| Inspection Dwg: D412-664-243 | Rev: E | Page 1 of 1 |

| Required Dimension | Min | Max |
|--------------------|--------|--------|
| Height | 24.24 | 24.50 |
| 1/2 Span | 53.59 | 53.85 |
| Angle | 49 | 52 |
| Total Span | 107.18 | 107.70 |
| Bending Passes | 8 | -- |
| Crushing | -- | 6% |



| | Side A | Midspan | Side B |
|------------------------------------|----------|-----------|-----------|
| Bending Passes | 9 Passes | 14 Passes | 11 Passes |
| Crushing | 6.6% | | 6.5% |
| Comments | | | |
| Side A = 6.6% crushing @ 9 Passes | | | |
| Midspan = 14 Passes | | | |
| Side B = 6.5% crushing @ 11 Passes | | | |

| | |
|-----------------|--------------------|
| QC15 Inspection | DAS |
| Date | 16 17/02/14 |

| Rev | Date | Change | Revised by | Approved |
|-----|----------|------------------------------------|------------|----------|
| A | 07.02.06 | New Issue | KJ/JM | |
| B | 07.05.08 | Dimensions updated per Dwg rev. D | KJ/JLM | |
| C | 10.02.02 | Dwg Rev updated | KJ | |
| D | 12.04.16 | Added bending, crushing dimensions | KJ | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|------|------|-----|---|----------------------|---|----------------|--------------|--------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data <input type="checkbox"/> | | | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | | | |

| FAULT CATEGORY | | | | | | | | | |
|---|---|--|---|---|--|--|--|--|--|
| Landing Gear | | | General | | | | | | |
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain | <input type="checkbox"/> Ovalized | <input type="checkbox"/> Pressure/Forced | | | | | |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware | <input type="checkbox"/> Over/Under tolerance | <input type="checkbox"/> Temperature/Cure | | | | | |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete | <input type="checkbox"/> Part Incorrect | <input type="checkbox"/> Weld | | | | | |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing | <input type="checkbox"/> Wrong Stock Pulled | | | | | |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Part Moved | | | | | | |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled | <input type="checkbox"/> Positioned Wrong | <input type="checkbox"/> Other | | | | | |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread | <input type="checkbox"/> Power Loss/Surge | | | | | | |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset | | | | | | | |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration | | | | | | | |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence | | | | | | | |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions | | | | | | | |

| Item | Qty -243 | Part Number | Description |
|------|-------------|----------------|---|
| 1 | X | D412-664-243 | CROSSTUBE ASSEMBLY (412 HIGH AFT) |
| 2 | 1 | D6009-129 | CROSSTUBE |
| 3 | 2 | D3595-063-570 | RUBBER CUSHION |
| 4 | 1 | D2896-1 | SUPPORT |
| 5 | 2 | D3189-1 | CHAFING SHIELD |
| 6 | 2 | D2856-600-1009 | ABRASION STRIP |
| 7 | 4 | MS21920-28 | CLAMP |
| 8 | 2 | MS21920-30 | CLAMP (OR MS21920-32) |
| 9 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE) |

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6009-129
FINISHED LENGTH = 124.100±0.020 (BEFORE BENDING/TRIMMING)
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D412-664-243" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: 47.0 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 8 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-30 CLAMPS (OR -32) WITH D3595-063-570 RUBBER CUSHIONS TO SECURE THE D2896-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF CROSSTUBE PER QSI 035.
- 15) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER

NO. 88093 MLJ
12/07/25

② DEO ATTACHED

RELEASED
2009-10-29

| | | | |
|------------|--|--|--------------|
| E | REFORMAT/REVISE GENERAL NOTES; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); ADD TOLERANCE (ZN B6-3, C4-3, C8-3 & C5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4. | RF | 09.09.30 |
| D | REMOVE D2732-058, CHANGE TO D3595-063-570 | PH | 07.03.09 |
| C | REMOVE D2856-600-1087, ADD D2732-058 & MAGNOBOND 6398, MS21920-32 WAS MS21920-30 | MB | 06.10.27 |
| B | ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES | PH | 05.02.04 |
| A | NEW ISSUE | PH | 01.10.17 |
| REV. | DESCRIPTION | BY | DATE |
| DESIGN | PH | DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA | |
| DRAWN | RF | | |
| CHECKED | QP | DRAWING NO. | REV. E |
| MFG. APPR. | DS | D412-664-243 | SHEET 1 OF 4 |
| APPROVED | AD | TITLE | SCALE |
| DE APPR. | TH | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | <small>COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

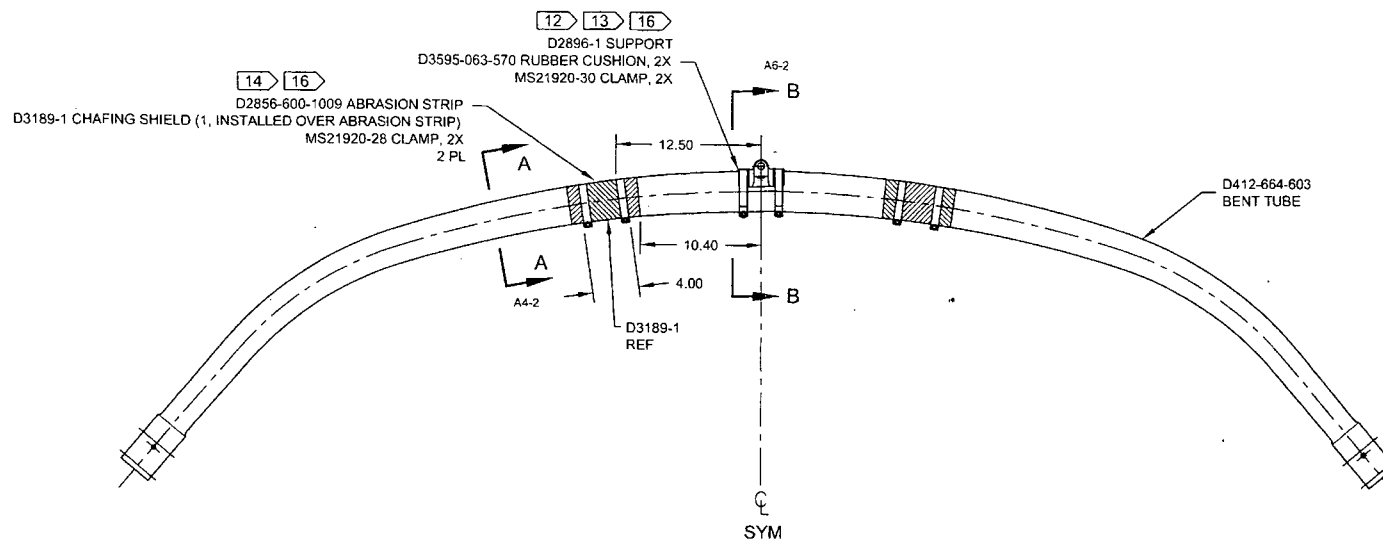
QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

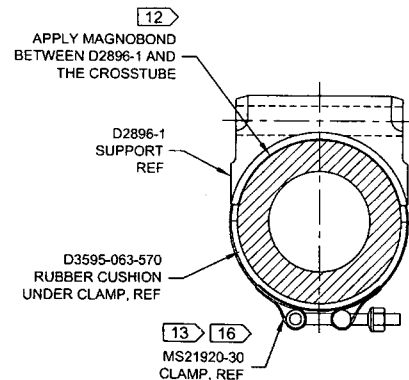
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

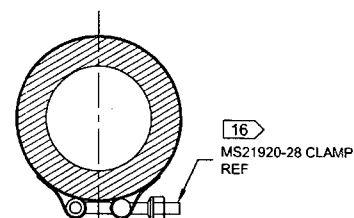
| | | |
|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|--|



D212-664-243
ASSEMBLY DETAIL



SECTION B-B D4-2
SCALE 4X



SECTION A-A C6-2
SCALE 4X

2 DEO ATTACHED
RELEASED
2009-10-28
NWP

| | | | |
|------------|----------|---|--------------|
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | JP | DRAWING NO. | REV. E |
| MFG. APPR. | JS | D412-664-243 | SHEET 2 OF 4 |
| APPROVED | JP | TITLE | SCALE |
| DE APPR. | JP | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | <small>COPYRIGHT © 2001 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

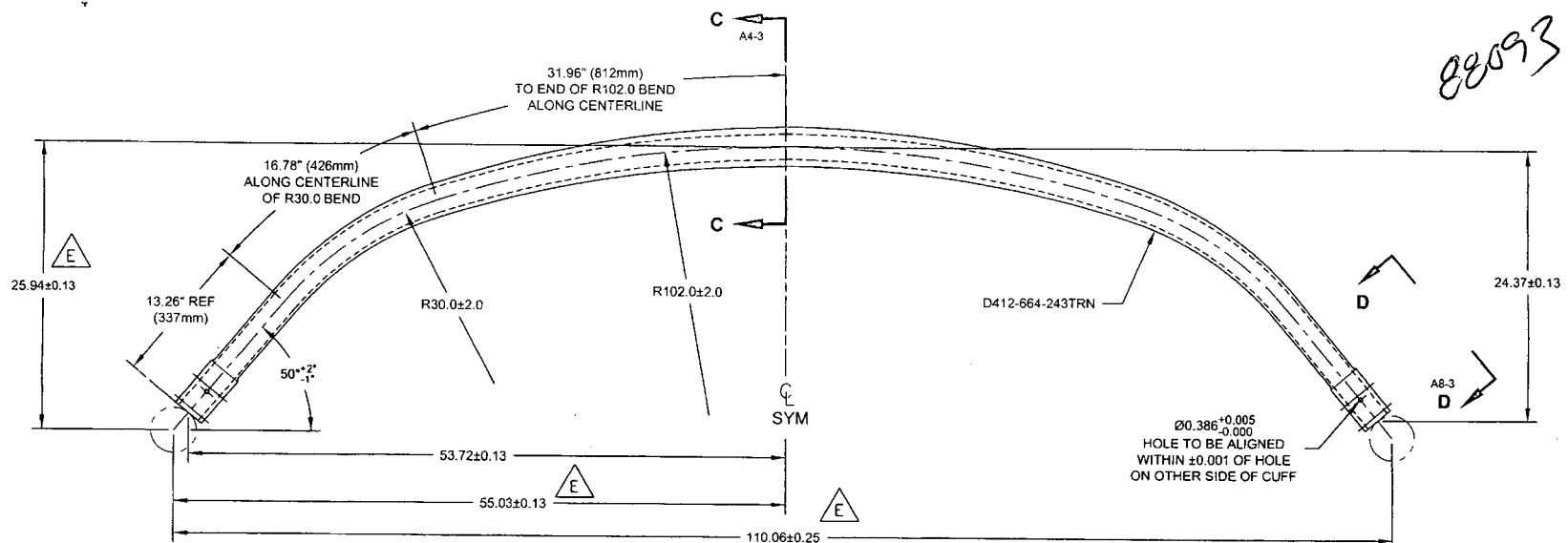
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| | | |
|---|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

8 7 6 5 4 3 2 1

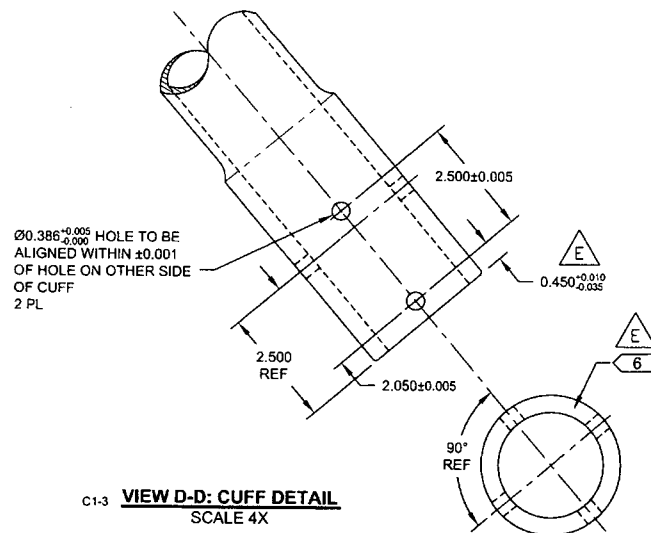
88093



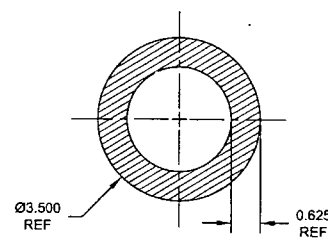
D412-664-603 10 E
BENDING AND DRILLING DETAIL

2 DEO ATTACHED

RELEASED
 2009-10-29
 MP



VIEW D-D: CUFF DETAIL
 SCALE 4X



SECTION C-C D5-3
 SCALE 4X

| | | | |
|---|----------|--|--------------|
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | Q | DRAWING NO. | REV. E |
| MFG. APPR. | S | D412-664-243 | SHEET 3 OF 4 |
| APPROVED | AP | TITLE | SCALE |
| DE APPR. | H | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | COPYRIGHT © 2001 BY DART AEROSPACE LTD | |
| THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL. HAS IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. | | | |

8 7 6 5 4 3 2 1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

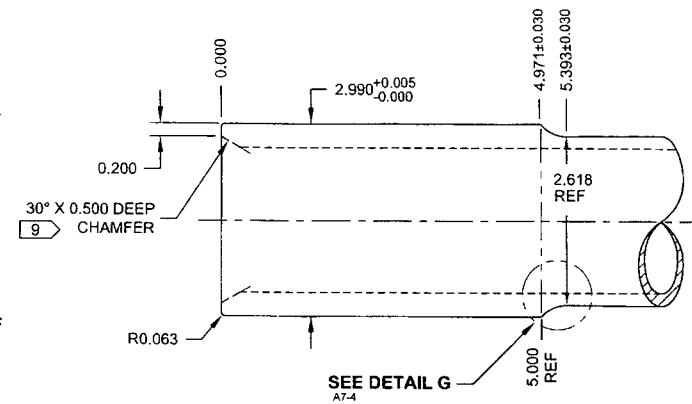
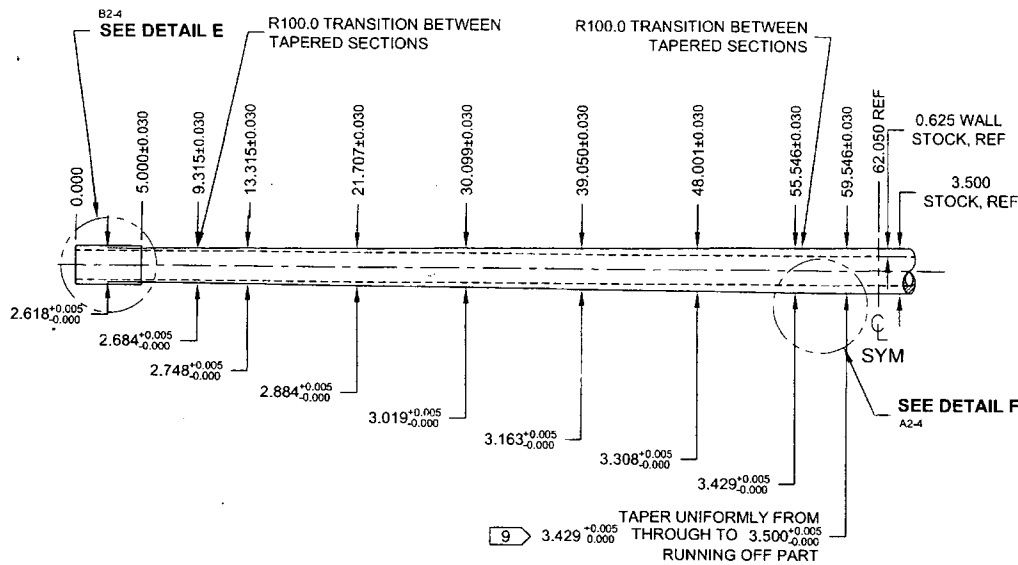
QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

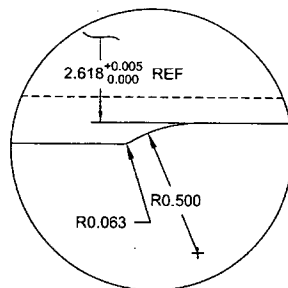
FAULT CATEGORY

| | | |
|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|--|

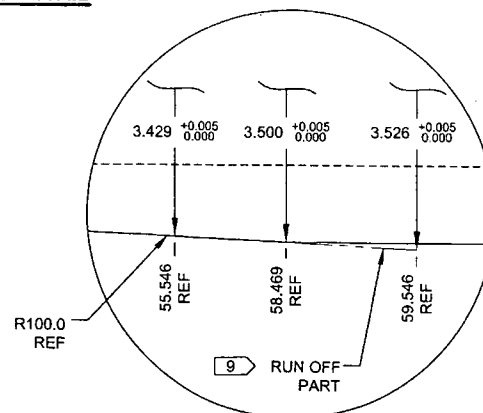


DETAIL E:
CROSSTUBE CUFF
SCALE 5X

D412-664-243TRN
TURNING DETAIL



DETAIL G:
CUFF TRANSITION
SCALE 10X



DETAIL F:
TAPER RUN-OFF
NOT TO SCALE

2 DEO ATTACHED

RELEASED
2009-10-29

| | | | |
|--|----------|--|--------------|
| DESIGN | PH | DART AEROSPACE LTD | |
| DRAWN | RF | HAWKESBURY, ONTARIO, CANADA | |
| CHECKED | Q | DRAWING NO. | REV. E |
| MFG. APPR. | JS | D412-664-243 | SHEET 4 OF 4 |
| APPROVED | TH | TITLE | SCALE |
| DE APPR. | TH | CROSSTUBE ASSEMBLY (412 HI AFT) | NTS |
| DATE | 09.09.30 | COPYRIGHT © 2001 BY DART AEROSPACE LTD | |
| THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. | | | |

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|---|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |

| | | | | | | | |
|-----------------------------|--|---------------|---|---------------|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-1 | SHEET NO. SHEET 1 OF 2 | SCALE NTS |
| DRAWN | CHECKED | MFG. APPR. | APPROVED | DE APPR. | | | |
| DATE 11.03.31 | DATE 11/03/31 | DATE 11.03.31 | DATE 11/03/31 | DATE 11-03-31 | | | |

PURPOSE:

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890.

88093

CHANGE:

PARTS LIST IS AMENDED AS FOLLOWS:

IS:

| Item | Qty -243 | Part Number | Description |
|------|-------------|----------------|----------------|
| 6 | 0 | D2856-600-1009 | ABRASION STRIP |

WAS:

| | | | |
|---|---|----------------|----------------|
| 6 | 2 | D2856-600-1009 | ABRASION STRIP |
|---|---|----------------|----------------|

NOTES 2 AND 14, SHEET 1 ARE AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA)
PAINT OUTSIDE PER DART QSI 005 4.2
AFTER PAINTING, APPLY CLEAR COAT ON HATCHED AREA
- 14) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3189-1
CHAFING SHIELD AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL
PROSEAL D3189-1 CHAFING SHIELD ONTO CROSSTUBE BY APPLYING A THIN COAT OF
PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.

WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF
CROSSTUBE PER QSI 035.

RELEASED
2011-04-07
MD

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | | | | | | | | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| | | |
|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|--|---|--|

| | | | | | | | |
|-----------------------------|--|---------------|---|--|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-1 | SHEET NO. SHEET 2 OF 2 | SCALE NTS |
| DRAWN | CHECKED | MFG. APPR. | APPROVED | | DE APPR. | | |
| DATE 11.03.31 | DATE 11.03.31 | DATE 11.03.31 | DATE 11.03.31 | | DATE 11.03.31 | | |

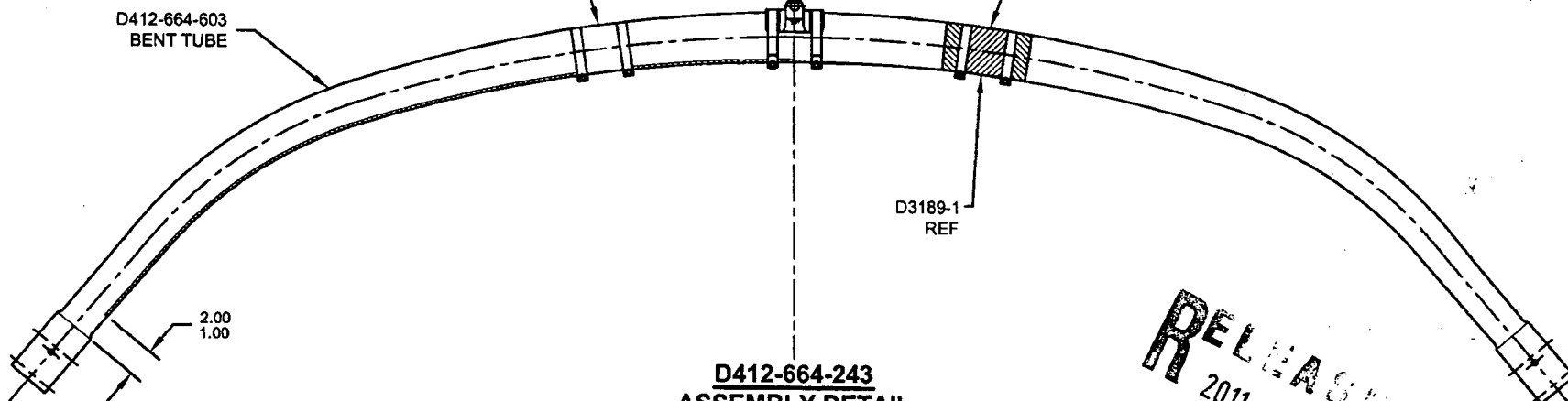
28093

IS:

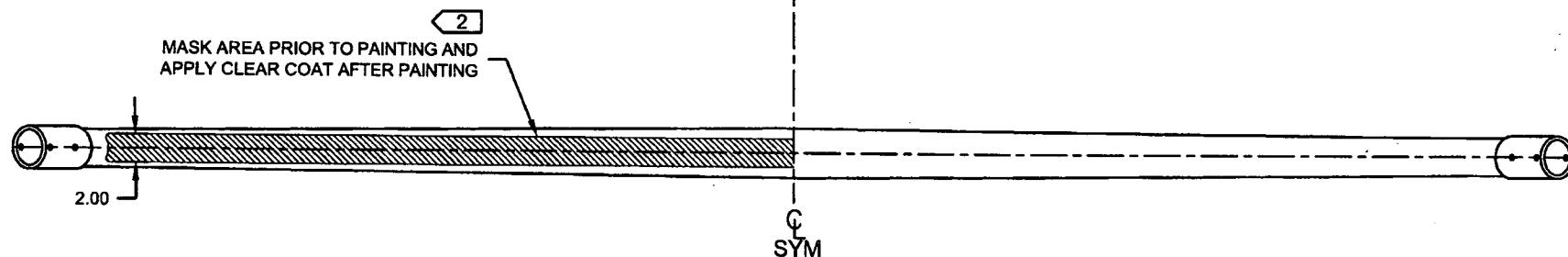
D3189-1 CHAFING SHIELD (1, INSTALLED OVER PROSEAL 890)
MS21920-28 CLAMP, 2X
2 PL

WAS:

D2856-600-1009 ABRASION STRIP
D3189-1 CHAFING SHIELD (1, INSTALLED OVER ABRASION STRIP)
MS21920-28 CLAMP, 2X
2 PL



RELEASED
2011-04-07



NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____ Part No. _____ NCR No. _____ | | | | DISPOSITION <div style="display: flex; justify-content: space-around;"> <div> <input type="checkbox"/> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update </div> </div> | | AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab </div> <div> <input type="checkbox"/> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite </div> <div> <input type="checkbox"/> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier </div> <div> <input type="checkbox"/> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other </div> </div> | | | | | |
| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector | | |
| Doc/Data | | | | | | | | | | | |
| Equip/Tooling | | | | | | | | | | | |
| Operator | | | | | | | | | | | |
| Material | | | | | | | | | | | |
| Setup | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| Process | | | | | | | | | | | |
| Supplier | | | | | | | | | | | |
| Training | | | | | | | | | | | |
| Unapproved | | | | | | | | | | | |

| FAULT CATEGORY | | | | | | | | | | | | |
|---|--|--|---|--|--|---|--|--|--|--|---|--|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | | | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | | | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other | |

| | | | | | | | |
|-----------------------------|---------------------------------------|-------------------------|---|--|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASS'Y (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-2 | SHEET NO. SHEET 1 OF 1 | SCALE NTS |
| DRAWN <i>q</i> | CHECKED <i>ASS</i> | MFG. APPR. <i>ER</i> | APPROVED <i>MP</i> | | DE APPR. <i>H</i> | | |
| DATE 11.09.07 | DATE 11.09.19 | DATE 11.09.19 | DATE 11.09.19 | | DATE 11.09.19 | | |

88093

PURPOSE:

REPLACE MAGNOBOND WITH 3M DP460 SCOTCH-WELD EPOXY ADHESIVE

CHANGE:

IS:

| Item | Qty -243 | Part Number | Description |
|------|-------------|-------------------|--------------------------------|
| 9 | A/R | SCOTCH-WELD DP460 | EPOXY ADHESIVE, 3M SCOTCH-WELD |

WAS:

| | | | |
|---|-----|----------------|---|
| 9 | A/R | MAGNOBOND 6398 | ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE) |
|---|-----|----------------|---|

NOTE 12 & 16, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) INSTALL D2896-1 CENTER SUPPORT USING A 0.04" TO 0.07" THICK LAYER OF SCOTCH-WELD DP460 PER QSI 015. LET CURE FOR 24 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER ADHESIVE HAS CURED FOR 24 HOURS.**

WAS:

- 12) INSTALL D2896-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2896-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASED
2011-09-29
MP

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data | | | | | | | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | | | | | | | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

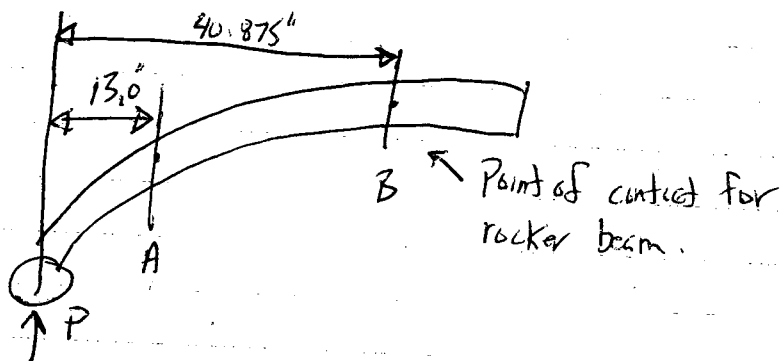
FAULT CATEGORY

| | | | | |
|---|---|---|--|---|
| Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube | General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio | <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |
|---|---|---|--|---|

CRUSHING OF D412-664-243

11.12.06

Acceptability of 8% CRUSHING AT END OF BEND



Point A: $OD_1 = 2.961"$, $OD_2 = 2.522"$

$$CRUSHING = (2.961 - 2.522) / (2.961 + 2.522) = 8\%$$

$I = 1.676 \text{ in}^4$ (from AutoCAD)

Point B: $OD_1 = 3.307"$, $I = 4.613 \text{ in}^4$

$$\begin{aligned} A: F &= M_c / I = P \times 13 \times 2.961 / 2 \times 1.676 = 11.484 \cdot P \\ B: &= P \times 40.875 \times 3.307 / 2 \times 4.613 = 14.651 \cdot P \end{aligned}$$

$$M.S. = 14.651 / 11.484 - 1 = 0.27$$

∴ Tube will break at rocker beam contact before area of 8% crushing, 8% crushing in area at end of tube bend is acceptable

11.12.06



LIQUID PENETRANT TEST REPORT

P- 12727

CLIENT Dart AgroSPACE DATE Aug 15/12 PAGE 1 OF 1
ATTENTION MAT/LINDA ACUREN JOB No. 188-12-C0316
ADDRESS 1270 ABERDEEN PO/WO No. 17693
HAVERBURY, ON. WORK LOCATION SAME
PROJECT CROSSTUBES ACCEPTANCE STD. ASTM 1417/01-038 REV./DATE 2005
ITEM(S) EXAMINED STUDS

JOB DESCRIPTION SEE RESULTS PROCEDURE No. LT-2002 REV./DATE 2008 TECHNIQUE No. LT-1002 REV./DATE 2008
PART No. SEE RESULTS MATERIAL ALUMINUM THICKNESS VARIABLES
SCOPE A WET FLOWCENT EXAMINATION WAS COMPLETED ON THE SURFACE
ON LY 100%

TEST DETAILS
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND MAGNAVIS. BLACK LIGHT S/N 16454 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT 245LO 2407 MINIMUM DWELL TIME 45 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER 170 MINIMUM DRY TIME >10 MIN. OTHER LAPIDOL
DEVELOPER SKD 52 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N 1098866 CAL DUE DATE 08/25/13
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < -4°C/ 20°F ☐ -4°C/ 20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

| RESULTS- <input checked="" type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL | | ACCEPT | REJECT |
|---|-------------------|--------|--------|
| ITEM | COMMENTS | | |
| | STUDS W.O. # | | |
| 3 | " " 87080 | ✓ | |
| 2 | " " 88164 | ✓ | |
| 5 | " " 83344 | ✓ | |
| | CROSSTUBES W.O. # | | |
| 1 | " " 88094 | ✓ | |
| 1 | " " 88093 | ✓ | |

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES
CLIENT REPRESENTATIVE Marc Brunet DTR# E-120511
TECHNICIAN (SIGNATURE): Mike Littleton REPORT REVIEWED BY:
NAME (PRINT): Mike Littleton NAME INITIALS
CGSB LEVEL II SNT LEVEL II CGSB LEVEL II SNT LEVEL II
CGSB REG. No. 6606 CGSB REG. No. 6606

WHITE - CLIENT COPY

CANARY - OFFICE COPY

PINK - TECHNICIAN COPY

GOLD - OFFICE COPY

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|--|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/> <i>THIS W/O ONLY</i> | AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|---------|------|-----|---|---------------------------|---|-------------|--------------|--------------|
| Doc/Data | 12/3/23 | 100 | 1 | KIT IS NOW CHG W/O9 WITH NEW CHATING SHIELD | DAG 12/3/23 12/3/23 | PAPERWORK / LABELS TO SAY CHG W/O9 | | | |
| Equip/Tooling | | | | | | | | | |
| Operator | | | | | | | | | |
| Material | | | | | | | | | |
| Setup | | | | | | | | | |
| Other | 12/3/23 | 100 | 1 | PAPERWORK NEEDS COPY OF DSI 9629 Rev. A. | DAG 12/3/23 12/3/23 | Add copy of DSI to PAPERWORK PAPERWORK (bluefile) OR SEND TO CUSTOMER AFTERWARDS | | | |
| Process | | | | | | | | | |
| Supplier | | | | | | | | | |
| Training | | | | | | | | | |
| Unapproved | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized |
| | | <input type="checkbox"/> Over/Under tolerance |
| | | <input type="checkbox"/> Part Incorrect |
| | | <input type="checkbox"/> Part Lost/Missing |
| | | <input type="checkbox"/> Part Moved |
| | | <input type="checkbox"/> Positioned Wrong |
| | | <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced |
| | | <input type="checkbox"/> Temperature/Cure |
| | | <input type="checkbox"/> Weld |
| | | <input type="checkbox"/> Wrong Stock Pulled |
| | | <input type="checkbox"/> Other |


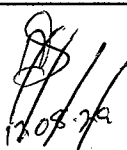
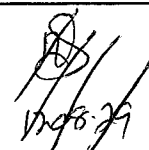
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | |
|-------------------|--|--|------------------------------------|--|--------------------------------------|
| Work Order: _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/> <i>THIS W/O ONLY</i> | AGAINST DEPARTMENT/PROCESS | | | |
| Part No. _____ | | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> |
| NCR No. _____ | | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> |
| | | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> |
| | | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |

| Root Cause | | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|--|---------|------|-----|---|-------------------------|--|---|---|---|
| Doc/Data | | 12/8/13 | 230 | 1 | INSTALL CHAFING SHIELD MADE TO D3189 REV. PC1. INSTALL PER ATTACHED PRELIM COPY OF DED D41L-649-243 -E-4. | DAS 12-89 12/8/13 | OK to install & ship crosstube made to D3189 Rev. PC1. Change is minor and parts approved to D3189 Rev. B with accepted deviations ANDY |  12/08/28 |  12/08/28 |  12/08/28 |
| Equip/Tooling | | | | | | | | | | |
| Operator | | | | | | | | | | |
| Material | | | | | | | | | | |
| Setup | | | | | | | | | | |
| Other | | | | | | | | | | |
| Process | | | | | | | | | | |
| Supplier | | | | | | | | | | |
| Training | | | | | | | | | | |
| Unapproved | | | | | | | | | | |

FAULT CATEGORY

| | | | |
|---|---|--|---|
| Landing Gear | | General | |
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain | <input type="checkbox"/> Ovalized |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware | <input type="checkbox"/> Over/Under tolerance |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete | <input type="checkbox"/> Part Incorrect |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Part Moved |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled | <input type="checkbox"/> Positioned Wrong |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread | <input type="checkbox"/> Power Loss/Surge |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset | <input type="checkbox"/> Pressure/Forced |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration | <input type="checkbox"/> Temperature/Cure |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Weld |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Wrong Stock Pulled |
| | | | <input type="checkbox"/> Other |

| | | | | | |
|------------------|---------------------------------|---|--------------------------------|---------------------------|--------------|
| D412-664-243 | CROSSTUBE ASSEMBLY (412 HI AFT) | DART AEROSPACE LTD ENGINEERING ORDER | D.E.O. NO. D412-664-243-E-4 | SHEET NO. SHEET 1 OF 3 | SCALE NTS |
| DRAWN 9P | CHECKED | MFG. APPR. | APPROVED | DE APPR. | |
| DATE 12.08.21 | DATE 12.08.21 | DATE | DATE | DATE | |

PURPOSE:

REMOVED ABRASION STRIP IN FAVOR OF A THIN LAYER OF PROSEAL 890. THIS ENGINEERING ORDER SUPERCEDES DEO D412-664-243-E-1

CHANGE:

PARTS LIST IS AMENDED AS FOLLOWS:

IS:

| Item | Qty -243 | Part Number | Description |
|------|-------------|----------------|----------------|
| 6 | 0 | D2856-600-1009 | ABRASION STRIP |

WAS:

| | | | |
|---|---|----------------|----------------|
| 6 | 2 | D2856-600-1009 | ABRASION STRIP |
|---|---|----------------|----------------|

NOTES 2, 14, AND 16 ON SHEET 1 ARE AMENDED AS FOLLOWS:

IS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA)
PAINT OUTSIDE PER DART QSI 005 4.2
AFTER PAINTING, APPLY CLEAR COAT ON HATCHED AREA
- 14) APPLY A THIN COAT OF PROSEAL 890 ON INSIDE CONCAVE SURFACE OF D3189-1 CHAFING SHIELD AND LET CURE PER MANUFACTURER'S INSTRUCTIONS. INSTALL PROSEALED D3189-1 CHAFING SHIELD ONTO CROSSTUBE BY APPLYING A THIN COAT OF PROSEAL 890 ONTO CROSSTUBE. BE SURE TO ELIMINATE ANY AIR GAPS.
- 16) TORQUE CLAMPS ON D2896-1 SUPPORT 80 TO 100 IN-LB. **TORQUE CLAMPS ON D3189-1 CHAFING SHIELD 40 TO 50 IN-LB.** ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

WAS:

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 14) INSTALL D2856-600-1009 ABRASION STRIPS WITH A 0.13 REF GAP ON BOTTOM SIDE OF CROSSTUBE PER QSI 035.
- 16) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

PRELIMINARY ISSUE

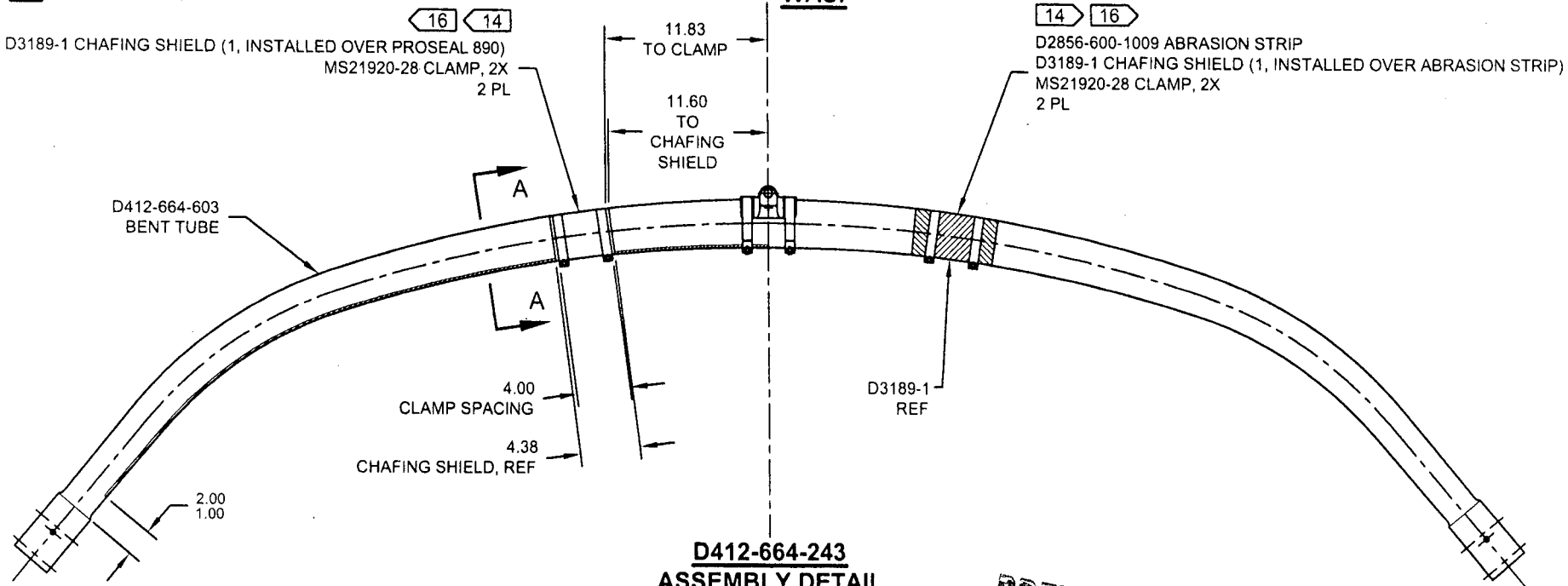
9P 12/14/23

| | | | | | | |
|-----------------------------|--|------------|---|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | D.E.O. NO. D412-664-243-E-4 | SHEET NO. SHEET 2 OF 3 | SCALE NTS |
| DRAWN 90 | CHECKED | MFG. APPR. | APPROVED | DE APPR. | | |
| DATE 12.08.21 | DATE 12.08.21 | DATE | DATE | DATE | | |

IS:

D3189-1 CHAFING SHIELD (1, INSTALLED OVER PROSEAL 890)
MS21920-28 CLAMP, 2X
2 PL

D412-664-603
BENT TUBE

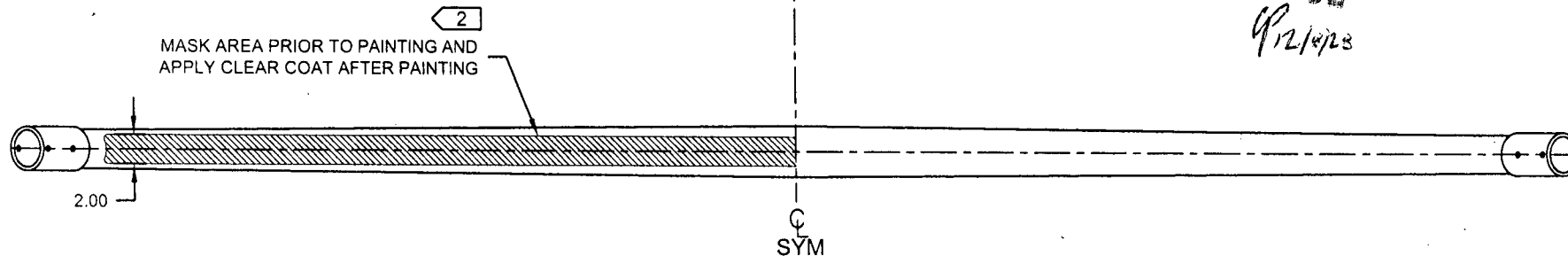


WAS:

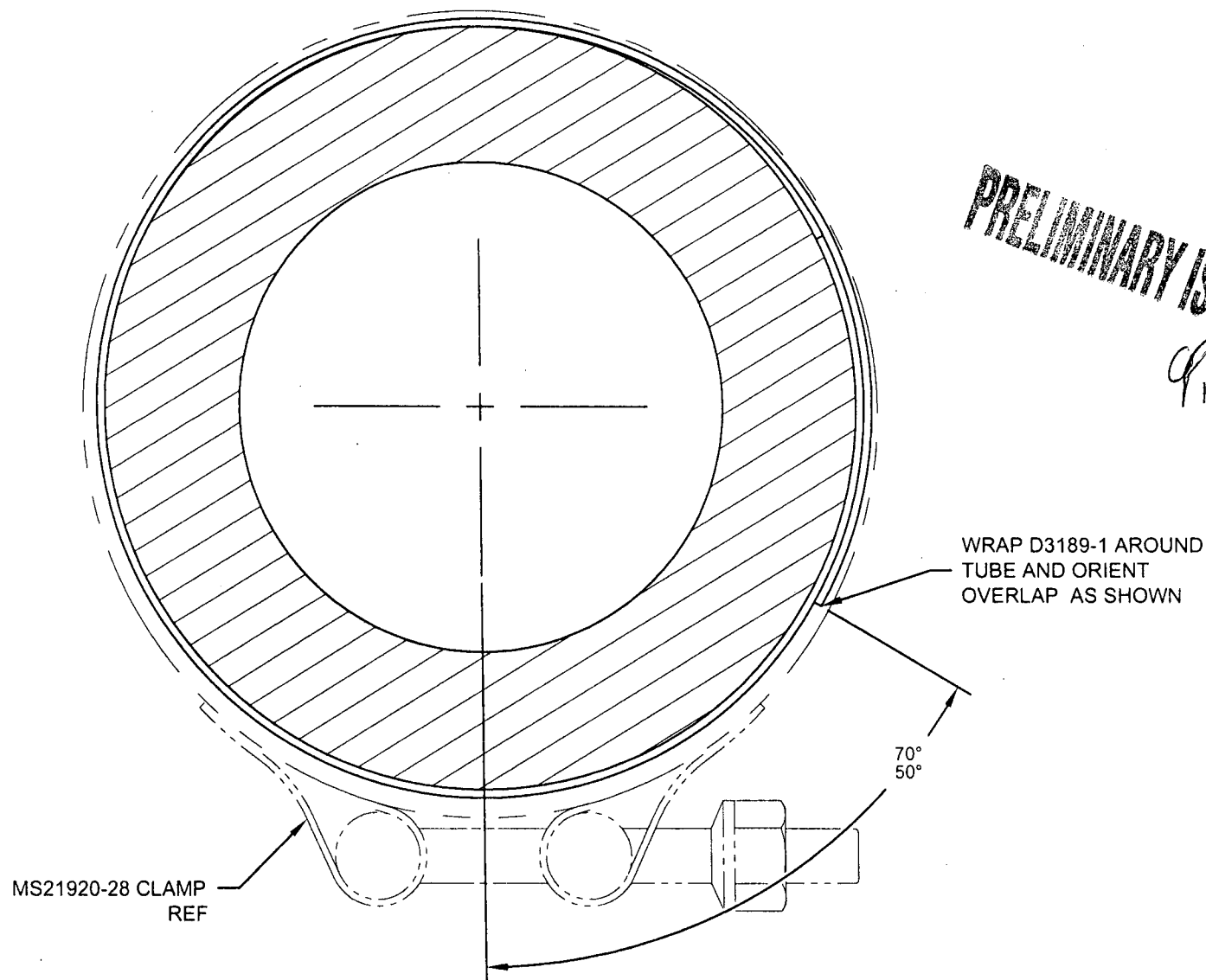
**D412-664-243
ASSEMBLY DETAIL**

PRELIMINARY ISSUE
9/2/23

MASK AREA PRIOR TO PAINTING AND
APPLY CLEAR COAT AFTER PAINTING



| | | | | | | | |
|-----------------------------|--|------------|---|--|--------------------------------|---------------------------|--------------|
| DRAWING NO. D412-664-243 | TITLE CROSSTUBE ASSEMBLY (412 HI AFT) | REV. E | DART AEROSPACE LTD ENGINEERING ORDER | | D.E.O. NO. D412-664-243-E-4 | SHEET NO. SHEET 3 OF 3 | SCALE NTS |
| DRAWN 97 | CHECKED | MFG. APPR. | APPROVED | | DE APPR. | | |
| DATE 12.08.21 | DATE 12.08.22 | DATE | DATE | | DATE | | |



SECTION A-A
CHAFING SHIELD DETAIL
VIEW ROTATED, NOT TO SCALE

PRELIMINARY ISSUE
12/2/23

REFERENCE ONLY**5.0 PARTS LIST****5.1 HIGH GEAR CROSSTUBES**

| Item | -101 | -201 | -203 | Part Number | Description |
|------|------|------|------|-----------------|--|
| | X | | | D212-664-101 | CROSSTUBE INSTALLATION, 204/205/210/212/214/412, UH-1H, UH-1A/B/E/F/L/P, TH-1F/L, HH-1K HIGH FWD |
| | | X | | D212-664-201 | CROSSTUBE INSTALLATION, 204/205/210/212/214, UH-1H, UH-1A/B/E/F/L/P, TH-1F/L, HH-1K HIGH AFT |
| | | | X | D412-664-203 | CROSSTUBE INSTALLATION, 412 HIGH AFT |
| 1 | 1 | | | D212-664-141 | CROSSTUBE ASSEMBLY, 204/205/210/212/214/412, UH-1H, UH-1A/B/E/F/L/P, TH-1F/L, HH-1K HIGH FWD |
| 2 | | 1 | | D212-664-241 | CROSSTUBE ASSEMBLY, 204/205/210/212/214, UH-1H, UH-1A/B/E/F/L/P, TH-1F/L, HH-1K HIGH AFT |
| 3 | | | 1 | D412-664-243 | CROSSTUBE ASSEMBLY, 412 HIGH AFT |
| 10 | 2 | | | * D2893-1 | SUPPORT |
| 11 | 4 | | | * D3595-063-450 | RUBBER CUSHION |
| 12 | 4 | | | * MS21920-25 | CLAMP (OR MS21042-26) |
| 13 | 4 | | | AN6-35A | BOLT |
| 14 | 4 | | | AN6-36A | BOLT |
| 15 | 6 | | | MS21042L6 | NUT (OR MS21042-6) |
| 16 | 18 | | | AN960JD616 | WASHER |
| 20 | | 2 | | * D2940-1 | SUPPORT |
| 21 | | 4 | | * D3595-063-530 | RUBBER CUSHION |
| 22 | | 4 | | * MS21920-28 | CLAMP (OR MS21042-30) |
| 23 | | 4 | | AN6-40A | BOLT |
| 24 | | 2 | | AN6-41A | BOLT |
| 25 | | 6 | | MS21042L6 | NUT (OR MS21042-6) |
| 26 | | 18 | | AN960JD616 | WASHER |
| 30 | | | 1 | * D2896-1 | SUPPORT |
| 32 | | | 2 | * D3595-063-570 | RUBBER CUSHION |
| 33 | | | 4 | * MS21920-28 | CLAMP |
| 34 | | | 2 | * MS21920-30 | CLAMP (OR MS21042-32) |
| 35 | | | 4 | AN6-40A | BOLT |
| 36 | | | 2 | AN6-41A | BOLT |
| 37 | | | 6 | MS21042L6 | NUT (OR MS21042-6) |
| 38 | | | 18 | AN960JD616 | WASHER |
| 39 | | | 2 | * D3189-1 | CHAFING SHIELD |
| 50 | 1 | 1 | | D3428-1 | PLACARD |

*REFERENCE ONLY. PARTS ARE INCLUDED IN D212-664-141/-241 OR D412-664-243 ASSEMBLIES ABOVE
 NOTE: KITS INCLUDE EXTRA HARDWARE FOR COMPATIBILITY WITH BOTH DART AND BELL/AAI
 SKIDTUBES.

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | | | | | | | | | | | | | | |
|--|--|--|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____ Part No. _____ NCR No. _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/> | AGAINST DEPARTMENT/PROCESS <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |
| Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | | | | | | | | | | | | | | | | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|---------|------|-----|---|----------------------|---|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/> | 12/1/23 | 230 | 1 | REMOVE THE CHAFING SHIELD INSTALLED PER 12/3/23 INSTRUCTION BECAUSE KA REQUIRES NO OVERLAP AT 60" | DAS 12 12/1/23 | REMOVE AND ENSURE THERE IS NO DAMAGE TO TUBE/FINISH | 12 08:28 | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | Other |
|---|---|--|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete |
| <input type="checkbox"/> Crushed/Crimped | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions |
| | | <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge |
| | | <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other |


NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

| | | | | | |
|-------------------|---|--|------------------------------------|--|--------------------------------------|
| Work Order: _____ | DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/> | AGAINST DEPARTMENT/PROCESS | | | |
| Part No. _____ | | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> |
| NCR No. _____ | | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> |
| | | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> |
| | | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> | |

| Root Cause | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|---------|------|-----|--|------------------------------|--|---|--------------|--------------|
| Doc/Data <input type="checkbox"/> | 12/3/29 | 230 | 1 | INSTALL CHAFFING SHIELD MADE TO D3185 Rev. PCI INSTALL PER ATTACHED PRELIM COPY OF D412-664-243-E-4 DATA SIGNED AND DATED 12/4/28 | DAS 12 2-89 12/4/29 | OK TO INSTALL & SHIP CROSSTUBE MADE TO D3185 Rev. PCI. CHANGE IS MINOR and parts have been approved to D3185 Rev. B with accepted deviation |  12-08-28 | | |
| Equip/Tooling <input type="checkbox"/> | | | | | | | | | |
| Operator <input type="checkbox"/> | | | | | | | | | |
| Material <input type="checkbox"/> | | | | | | | | | |
| Setup <input type="checkbox"/> | | | | | | | | | |
| Other <input type="checkbox"/> | | | | | | | | | |
| Process <input type="checkbox"/> | | | | | | | | | |
| Supplier <input type="checkbox"/> | | | | | | | | | |
| Training <input type="checkbox"/> | | | | | | | | | |
| Unapproved <input type="checkbox"/> | | | | | | | | | |

FAULT CATEGORY

| Landing Gear | General | | |
|---|---|--|---|
| <input type="checkbox"/> Bending | <input type="checkbox"/> Bend | <input type="checkbox"/> Grain | <input type="checkbox"/> Ovalized |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route | <input type="checkbox"/> Hardware | <input type="checkbox"/> Over/Under tolerance |
| <input type="checkbox"/> Cracks | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete | <input type="checkbox"/> Part Incorrect |
| <input type="checkbox"/> Crushed/Crimped. | <input type="checkbox"/> Burrs | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing |
| <input type="checkbox"/> Cuffs | <input type="checkbox"/> Contamination | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Part Moved |
| <input type="checkbox"/> Heat Treat | <input type="checkbox"/> Countersink | <input type="checkbox"/> Mislabeled | <input type="checkbox"/> Positioned Wrong |
| <input type="checkbox"/> Inspection Strip in Tube | <input type="checkbox"/> Cut Too Short | <input type="checkbox"/> Misread | <input type="checkbox"/> Power Loss/Surge |
| <input type="checkbox"/> Ripples in Bend | <input type="checkbox"/> Drill Holes | <input type="checkbox"/> Offset | <input type="checkbox"/> Pressure/Forced |
| <input type="checkbox"/> Torque Waves in Extrusion | <input type="checkbox"/> Drawing | <input type="checkbox"/> Out of Calibration | <input type="checkbox"/> Temperature/Cure |
| <input type="checkbox"/> Turning Sequence | <input type="checkbox"/> Finish | <input type="checkbox"/> Out of Sequence | <input type="checkbox"/> Weld |
| <input type="checkbox"/> Wave/Twist in Tube | <input type="checkbox"/> Folio | <input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Wrong Stock Pulled |
| | | | <input type="checkbox"/> Other |

Non-Conformance Report

Printed on: Wednesday, August 29, 2012

| Details | | | |
|--|--|---------------------------------------|---|
| Raised Date 8/29/2012 | Status Open | Owner Smith, Patrick Robert | Number NCR12-1760 |
| Target Date 9/15/2012 | Standard | | Severity MINOR |
| Source Quality Inspection | | Audit | |
| Raised By Person Downing, Eric | Raised Against (Department or Supplier) Engineering\Design | | Fault Category General\Documentation\Data |
| Details after installing D3189-1 chafing shield's on work orders B88094, B88093, B86985, B86986 it was found that the installtion on the drawing is not matching what is called up on the ICA. | | | |
| Product | | | |
| Document | | Root Cause | |
| Closed By | Closed Date | Resolution | |

| Corrective Action | | | |
|---------------------------------|-------------------------------|--------------------|------------------|
| Target Date 9/15/2012 | Owner Petsche, Mike | Closed Date | Closed By |
| Details | | | |

| Actions | | | |
|--|----------------|--------------------|-----------------------|
| Number | Owner | Target Date | Completed Date |
| Details | | Response | |
| 1 | Petsche, Mike | 9/8/2012 | |
| open a PAR to have the drawings match what is called up on the ICAPAR #_____ | | | |
| 2 | Lacelle, Linda | 8/31/2012 | |
| rework all the D412-664-203 cross tubes in stock | | | |

| Verification & Review | | | |
|-------------------------|-------|-------------|-----------|
| Target Date 9/2/2012 | Owner | Closed Date | Closed By |
| Details | | | |

| Actions | | | |
|---------|-------|-------------|----------------|
| Number | Owner | Target Date | Completed Date |
| Details | | Response | |
| | | | |
| | | | |